

LICENSED CONTRACTOR ELECTRICAL PERMIT

COMMUNITY SERVICES AGENCY
Department of Planning
Inspection Division

Inspection Division 100 N. Jefferson Street, Room 608 Green Bay, WI 54301 (920) 448-3300 - phone (920) 448-3117 - fax

inspmail@greenbaywi.gov

Project Address:				This section for City use only	
Owner:Owner's Phone #:				: #:	
Electrical Contractor: _			Permit	Code:	
Electrical Contractor's	E-mail:		Permit Parcel		
Electrical Contractor's Phone #:Cell #:					
Value of work: \$			Receip Date:	t #:	
<u>OCCUPANCY</u>					
☐ Single-Family	☐Commercial	☐ Educational	☐Multi-Family	Number of Units	
☐Two-Family	<u> </u>				
NATURE OF WOL	<u> </u>				
☐ Alteration	Repairs	☐Swimming Pool	l □Hot tub	o/spa	
Remodeling	□Sign	Detached Garag	ge Other_		
applicable Federal, Stat "ENERC	e, local electrical code GIZING THE DESCE	es and utility service rules. RIBED WIRING WILL	IN NO WAY CREA	on will be in compliance with the TE A HAZARD" Certification #	
Signature (Master Elect	rician Responsible For	r Work) WI Master C	Sertification #	Date	
INSPECTOR STAT	EMENT: I hereby o	certify the work completed	as of date signed con	mplies with applicable codes.	
Inspector Signature		Date			
☐ Check box for Onlin	ne Payment				
		notification of project num	ber and permit fee. T	This information is required to	
☐ Phone] Fax	☐ Emai	1	